2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000033101

Entity Name: KNOW YOUR IDENTITY, INC

FILED Apr 01, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1600 CEDAR CREEK CIRCLE 401 W SEMINOLE BLVD SANFORD, FL 32771 94

SANFORD, FL 32771

Current Mailing Address: New Mailing Address:

PO BOX 0637 GOLDENROD, FL 32733 401 W SEMINOLE BLVD 94 SANFORD, FL 32771

FEI Number: 26-2311329 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DANIELS, DAPHENE

1600 CEDAR CREEK CIRCLE

SANFORD, FL 32771 US

DANIELS, DAPHENE

401 W SEMINOLE BLVD

94

SANFORD, FL 32771 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 04/01/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: DANIELS, DAPHENE

Address: 401 W SEMINOLE BLVD APT 94

City-St-Zip: SANFORD, FL 32771

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAPHENE D DANIELS P 04/01/2012